Effective October 1, 2000

Application or Docket Number

Ellective October 1, 2000									-				
			S FILED - PART (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS							RAT	Ε	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2/ minus 20= * /				X\$ 9)=		OR	X\$18=	18	
INDEPENDENT CLAIMS			3 minus 3 = * 0				X40	=	- · · - · · · · · · · · · · · · · · · ·	OR	X80=		
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				+135	<u></u>			+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA		•	OR OR	TOTAL	n.0	
CLAIMS AS AMENDED - PART II							1017	٦ <u>.</u> ا		Un		THAN	
		(Column 1)	(Column 2) (Column 3)				SMALL ENTITY			OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X40	=		OR	X80=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM		+135	=		OR	+270=		
								TAL		OR	TOTAL ADDIT. FEE		
	ADDIT. FEEOTT ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	ATATION OF AN	Minus	***	CLAIM	=	X40	=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+270=		
								TAL EE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLA.MS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATI	=	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$ 9	= [OR	X\$18=		
	Independent	•	Minus	***		=	X40:				X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR	-100		
* If the entry is column 4 is loss than the entry is solven 0 write "0" is solven 0										OR	+270=		
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." A If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 								AL EE		OR	TOTAL ADDIT. FEE		
		mber Previously Pa ber Previously Pai					er found in the	app	ropriate box	in col	lumn 1.		